| Subs  | titute fe                | or form  | 1449A&B/PTO  |                      |  |                        |   |   | Comple                     | te if         | Known   |        |
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| INFORMATION DISCLOSURE STATEMENT BY APPLICANT |                          |  |  |                      | Filing Date November 18, 2003                      |                        |   |   |                            |               |   |        |
|   |                          |  |  |                      | First Named Inventor Mocikat, Ralph  Art Unit 1647 |                        |   |   |                            |               |   |        |
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|   | (                        | Use as   | many sheets as n                                   | ecessary             | )  | Exami                  | Examiner Name WOODWARD, Cherie Michelle |   |                            |               |   |        |
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| Substitute  | for form 1449A&B                        | /PTO               |      |                        | Complete if Known         |
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|             |   |                    |      | Application Number     | 10/716,580                |
| INFO        | RMATION                                 | N DISCLOS          | SURE | Filing Date            | November 18, 2003         |
|             | • | BY APPLIC          |      | First Named Inventor   | Mocikat, Ralph            |
| . • • • • • |   |                    |      | Art Unit               | 1647                      |
|             | (Use as many sh                         | eets as necessary) | •    | Examiner Name          | WOODWARD, Cherie Michelle |
| Sheet       | 2                                       | of                 | 2    | Attorney Docket Number | 080306-000100US           |

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|------------------------|--------------|---|----|
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